

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET						SERIAL NO. <i>10/411748</i>	FILING DATE <i>2</i>	
						APPLICANT(S)		
CLAIMS								
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		IND	DEP
	IND	DEP	IND	DEP	IND	DEP		
1	1							
2	1							
3	1							
4	1							
5	2							
6	2							
7	1							
8	1							
9	1							
10	1							
11	1							
12	1							
13	5							
14	5							
15	5							
16	5							
17	5							
18	5							
19	8							
20	8							
21	3							
22	3							
23	3							
24	3							
25	3							
26	3							
27	7							
28	7							
29	3							
30	3							
31	3							
32	3							
33	7							
34	1							
35	1							
36	1							
37	1							
38	1							
39								
40								
41								
42								
43								
44								
45								
46								
47								
48								
49								
50								
TOTAL IND	9							
TOTAL DEP	15							
TOTAL CLAIMS	44							